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Fill in this information to identify your case:	《 《 14 14 14 14 14 14 14 14 14 14 14 14 14	
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself						
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name						
	Write the name that is on	Eric	Heather				
	your government-issued picture identification (for	First name	First name				
	example, your driver's	M.	I.				
	license or passport).	Middle name	Middle name				
	Bring your picture	Roushia	Roushia				
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.	Heather I. Pfefferkorn					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8841	xxx-xx-2649				

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Debtor 1 Eric M. Roushia
Debtor 2 Heather I. Roushia

Case number (if known)

		Abo	out Debtor 1:	Abo	out Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years					■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Busi	iness name(s)	Busi	iness name(s)			
		EIN	s	EIN	S			
5.	Where you live			If D∈	ebtor 2 lives at a different address:			
			Main St. nroe Center, IL 61052					
			nber, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Ogl	e					
		Cou	nty	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		abo	our mailing address is different from the one ve, fill it in here. Note that the court will send any ces to you at this mailing address.					
		Number, P.O. Box, Street, City, State & ZIP Code			Number, P.O. Box, Street, City, State & ZIP Code			
6. Why you are choosing		Check one:			Check one:			
	this district to file for bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
			I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Det	otor 2 Heather I. Roushia	ł	Case number (if known)						
Par	t 2: Tell the Court About	our Bank	ruptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chap	ter 7						
		☐ Chap	ter 11						
		☐ Chap							
		☐ Chap							
8.	How you will pay the fee	abo ord	out how ye	ou may pay. Typical attorney is submitti	ly, if you are paying the fee yo	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or mone lf, your attorney may pay with a credit card or check with			
					n, sign and attach the Application for Individuals to Pay				
			-	ee in Installments (O at my fee be waive	•	only if you are filing for Chapter 7. By law, a judge may,			
		but	t is not rec	juired to, waive your	fee, and may do so only if you	ir income is less than 150% of the official poverty line the			
		ap _i the	plies to yo • <i>Applicati</i>	ur family size and ye on to Have the Char	ou are unable to pay the fee in oter 7 Filing Fee Waived (Offic	installments). If you choose this option, you must fill out al Form 103B) and file it with your petition.			
						,			
9.	Have you filed for bankruptcy within the	■ No.							
	last 8 years?	☐ Yes.							
			District	· · · · · · · · · · · · · · · · · · ·	When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your	— N-	Go to	line 12.	-, -				
	residence?	■ No.			d and accidentation to the				
		☐ Yes.			an eviction judgment against	you and do you want to stay in your residence?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> bankruptcy petition		udgment Against You (Form 101A) and file it with this			

Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Document Page 4 of 69 Eric M. Roushia Debtor 1 Debtor 2 Heather I. Roushia Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business? Name and location of business ☐ Yes A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Where is the property?

Number, Street, City, State & Zip Code

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Document Page 5 of 69

Debtor 1 Eric M. Roushia
Debtor 2 Heather I. Roushia

Case number (if known)

15.	Tell the court whether
	you have received a
	briefing about credit
	21.01.11.5 44041 410411

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Page 6 of 69 Document Debtor 1 Eric M. Roushia Debtor 2 Heather I. Roushia Case number (if known)

16.	What kind of debts do	16a.	Are your debts primarily c	onsumer debts? Consu	ımer debts are	defined in 1	11 U.S.C. & 101(8) as "incurred by an			
	you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
			□ No. Go to line 16b.							
			Yes. Go to line 17.							
		16b.	Are your debts primarily b money for a business or inventor and a business or inventor a business or inventor and a business or inventor a business or inventor and a business or inven	ousiness debts? Busines estment or through the op-	ss debts are d peration of the	ebts that you business or	u incurred to obtain r investment.			
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you	owe that are not consume	er debts or bu	siness debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter	r 7. Go to line 18.			The state of the s			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be av	Do you estimate that afte vailable to distribute to ur	er any exempt nsecured credi	property is e itors?	excluded and administrative expenses			
	administrative expenses		■ No							
	are paid that funds will be available for		□Yes							
	distribution to unsecured creditors?									
18.	How many Creditors do	1 -49		□ 1,000-5,000	De real Day of		25,001-50,000			
	you estimate that you owe?	☐ 50-99)	☐ 5001-10,000			50,001-100,000			
		<u> </u>		10,001-25,000)		More than100,000			
		200-9	99		Telephone					
19.	How much do you	\$0 - \$50,000		□ \$1,000,001 - \$			\$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	\$10,000,001 -			3 \$1,000,000,001 - \$10 billion			
			,001 - \$500,000		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		3 \$10,000,000,001 - \$50 billion More than \$50 billion			
		□ \$500,001 - \$1 million		_						
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 - S			\$500,000,001 - \$1 billion			
	to be?		001 - \$100,000		0,000,001 - \$50 million ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,001 - \$50 billion					
			,001 - \$500,000 ,001 - \$1 million	☐ \$50,000,001 = ☐ \$100,000,001			More than \$50 billion			
		— \$300,				osche zi.	SO TEMPO MATERIAL PROPERTY OF THE SOUTH OF T			
Par					A 1972					
For	you	I have ex	kamined this petition, and I de	clare under penalty of pe	rjury that the i	nformation p	provided is true and correct.			
			chosen to file under Chapter 7 tates Code. I understand the				Chapter 7, 11,12, or 13 of title 11, proceed under Chapter 7.			
		documer	rney represents me and I did nt, I have obtained and read th	ne notice required by 11 l	J.S.C. § 342(b	o).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.								
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U/S.C. §§ 152, 1341 1519, and 3571.								
		Eric M.	M. Roushia X Roushia e of Debtor 1		/s/ Heather I Heather I. R Signature of D	oushia	1/ sweet alu			
		Executed	d on August 30, 2016 MM / DD / YYYY		Executed on August 30, 2016 MM / DD / YYYY					

Case 16-82037 Filed 08/30/16 Entered 08/30/16 14:02:09 Doc 1 Desc Main Page 7 of 69 Document Eric M. Roushia Debtor 1 Case number (if known) Debtor 2 Heather I. Roushia I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed For your attorney, if you are under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter represented by one for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) If you are not represented by and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. an attorney, you do not need to file this page. /s/ David L. Davitt Date August 30, 2016 Signature of Attorney for Debtor MM / DD / YYYY David L. Davitt Printed name Schlueter Ecklund Firm name 4023 Charles St. Rockford, IL 61108

Email address

Number, Street, City, State & ZIP Code

Contact phone 815 229-5333

6206402 Bar number & State ddavitt@rockriverlaw.com

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Fill	in this informat	ion to identify your	case:			
Del		Eric M. Roushia				
Del		First Name	Middle Name	Last Name		
		Heather I. Roushi First Name	Middle Name	Last Name		
Uni	ited States Bankr	uptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Cal	se number					
	nown)	 			☐ Check	if this is an
					amend	led filing
<u>Of</u>	ficial Forn	n 106Sum				
Su	ımmary of '	Your Assets a	and Liabilities and (Certain Statistical Information	1	2/15
info	rmation. Fill out	all of your schedule	es first; then complete the inf	filing together, both are equally responsible formation on this form. If you are filing amen	for supplying ded schedul	g correct es after you file
/ou	ir original torms,	you must fill out a	new <i>Summary</i> and check the	box at the top of this page.		
Pa	t 1: Summariz	ze Your Assets				
					Your as Value o	sets fwhat you own
1.	Schedule A/B: 1a. Copy line 5	Property (Official Fo	orm 106A/B) rom Schedule A/B		\$	21,000.00
	1b. Copy line 6	2, Total personal prop	perty, from Schedule A/B		\$	22,651.00
	1c. Copy line 6	3, Total of all property	y on Schedule A/B		\$	43,651.00
Par	t 2: Summariz	ze Your Liabilities				
					Your lia Amount	bilities you owe
2.			laims Secured by Property (Offi mn A, Amount of claim, at the b	cial Form 106D) ottom of the last page of Part 1 of <i>Schedule D</i>	\$	16,354.00
3.			Unsecured Claims (Official Ford 1 (priority unsecured claims)	m 106E/F) om line 6e of S <i>chedule E/F</i>	\$	0.00
	3b. Copy the to	otal claims from Part	2 (nonpriority unsecured claims	s) from line 6j of Schedule E/F	\$	109,423.00
				Your total liabilitie	s \$	125,777.00
Par	t 3: Summariz	ze Your Income and	Expenses			
4.	Schedule I: You	ur Income (Official Fo	orm 106l)		\$	2,989.17
5.	Schedule J: Yo	ur Expenses (Official	Form 106J)		·	
	Copy your mon	thly expenses from li	ne 22c of Schedule J		\$	2,989.00
Par	Answer T	hese Questions for	Administrative and Statistica	al Records		
6.			er Chapters 7, 11, or 13? on this part of the form. Check	this box and submit this form to the court with y	our other sch	edules.
7.	■ Yes What kind of d	lebt do you have?				
	Your debt	ts are primarily cons I purpose." 11 U.S.C.	sumer debts. Consumer debts § 101(8). Fill out lines 8-9g for	are those "incurred by an individual primarily fo statistical purposes. 28 U.S.C. § 159.	r a personal,	family, or
		ts are not primarily with your other sched		othing to report on this part of the form. Check th	is box and su	bmit this form to

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Debtor 1 Eric M. Roushia
Heather I. Roushia

Case number (if known)

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 	\$3,649.55
--	------------

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/E, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	35,708.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	35,708.00

Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Page 10 of 69 Document Fill in this information to identify your case and this filing: Debtor 1 Eric M. Roushia First Name Middle Name Last Name Debtor 2 Heather I. Roushia (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply 1639 10th Avenue Single-family home П Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the IL 61104-0000 Rockford Land portion you own? entire property? City State ZIP Code \$21,000.00 \$21,000.00 Investment property Timeshare Describe the nature of your ownership interest Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only Winnebago Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$21,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

page 1

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Debtor		ric M. Rou			Document F	Page 11 of 69			
Debtor	r 2 <u> </u>	leather I. R	oushia				Case number (if known)		
3. Cars	s, vans	, trucks, trac	tors, spor	t utility vehi	cles, motorcycles				
ПΝ	0								
■ Y	es								
·									
3.1	Make:	Ford			Who has an interest in the p	property? Check one			ims or exemptions. Put claims on Schedule D:
	Model:	Explorer	•		Debtor 1 only				s Secured by Property.
	Year:	1997			Debtor 2 only		Current value of t	he	Current value of the
		mate mileage:	1	94,000	Debtor 1 and Debtor 2 onl	•	entire property?		portion you own?
г	Other in	formation:			At least one of the debtors	and another			
					Check if this is commun (see instructions)	ity property	\$1,000	.00	\$1,000.00
3.2	Make:	Yahama			Who has an interest in the p	property? Check one			ims or exemptions. Put
	Model:		lotorcycle	е	Debtor 1 only				s Secured by Property.
	Year:	1977			Debtor 2 only		Current value of	the	Current value of the
	• •	mate mileage:			Debtor 1 and Debtor 2 onl		entire property?		portion you own?
Г	Other in	formation:			At least one of the debtors	and another			
					Check if this is commun (see instructions)	ity property	\$1,500	.00	\$1,500.00
3.3	Make:	Ford			Who has an interest in the p	property? Check one			ims or exemptions. Put
	Model:	Expediti	ion		Debtor 1 only				s Secured by Property.
	Year:	2000		231k	Debtor 2 only		Current value of t	he	Current value of the
		mate mileage:		431K	Debtor 1 and Debtor 2 onl	-	entire property?		portion you own?
Г	Other in	normation.			At least one of the debtors	and another			
					Check if this is commun (see instructions)	ity property	\$1,000	.00	\$1,000.00
4. Wat Exam ■ N □ Y	<i>nples:</i> E o	, aircraft, mo Boats, trailers	otor homes , motors, p	s, ATVs and ersonal wate	other recreational vehicle recraft, fishing vessels, snow	es, other vehicles, vmobiles, motorcyc	, and accessories cle accessories		
5 Add .pag	d the do	ollar value o ı have attach	f the portioned for Par	on you own t 2. Write th	for all of your entries fror at number here	m Part 2, including	g any entries for =>		\$3,500.00
		ibe Your Perso							
					rest in any of the followin	g items?		po Do	urrent value of the ortion you own? o not deduct secured aims or exemptions.
Exa	<i>mples:</i> No				china, kitchenware				
Y	res. De	escribe							
			Misc. h	ousehold	goods, furnishings & a	ppliances			\$2,000.00
					_			_	

	Case 16-8	2037 Doc 1	Filed 08/30/16	Entered 08/30/16 14:	:02:09 Des	sc Main
Debi Debi			Document	Page 12 of 69 Case numb	per (if known)	
	ectronics xamples: Televisions ar	nd radios; audio, video,	stereo, and digital equ	ipment; computers, printers, scann	ners; music collect	ons; electronic devices
	including cell	phones, cameras, med	lia players, games			
	Yes. Describe					
	ollectibles of value					
<i>E</i> .	xamples: Antiques and other collection	figurines; paintings, pri ons, memorabilia, collec	nts, or other artwork; bo ctibles	ooks, pictures, or other art objects;	stamp, coin, or ba	seball card collections;
	No					
	Yes. Describe	ad babbia				
	quipment for sports an x <i>amples:</i> Sports, photog musical instru	graphic, exercise, and o	other hobby equipment	bicycles, pool tables, golf clubs, si	kis; canoes and ka	ayaks; carpentry tools;
_	No					
	Yes. Describe					
	Firearms Examples: Pistols, rifles	, shotguns, ammunitior	n, and related equipmen	nt		
_	No Yes. Describe					
	Clothes					
_1	Examples: Everyday clo	thes, furs, leather coat	s, designer wear, shoes	s, accessories		
_	No Yes. Describe					
	Tos. Describe					
		Clothing				\$1,500.00
	e welry Ex <i>amples:</i> Everyday jew I No I Yes. Describe	velry, costume jewelry,	engagement rings, wed	dding rings, heirloom jewelry, watch	hes, gems, gold, s	ilver
		Wedding Ring			_	\$1,200.00
	.			1		
	lon-farm animals Ex <i>amples:</i> Dogs, cats, b	oirds, horses				
	No Yes. Describe					
					-l A 11-A	
_	iny other personal and No	d household items you	u did not already list,	including any health aids you die	a not list	
	Yes. Give specific info	ormation				
15.	Add the dollar value o	of all of your entries fr	om Part 3, including a	any entries for pages you have a	ttached	
	for Part 3. Write that r					\$4,700.00
Part 4	4: Describe Your Finance	ial Assets				
	ou own or have any le		est in any of the follow	ving?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples: Money you h	nave in your wallet, in yo	our home, in a safe dep	osit box, and on hand when you fil	le your petition	
_	No Yes					
ب	1 (65		•••••	••••••		

Official Form 106A/B Schedule A/B: Property

page 3

Debtor 1	Eric M. Roushia	Document Page 13 of 69	
Debtor 2	Heather I. Roushia	Case number (if known)	
17. Depor Exan	sits of money nples: Checking, savings, or other financial institutions. If you have multiple acco	accounts; certificates of deposit; shares in credit unions, brokerage houses, and ounts with the same institution, list each.	I other similar
_	5	Institution name:	
	17.1.	Savings acct - Members Alliance Credit Union	\$25.00
	17.2.	Checking acct - Members Alliance Credit Union	\$500.00
	17.3.	OSF Credit Union	\$5.00
Exan ■ No □ Yes	Institution or is:	th brokerage firms, money market accounts	
	publicly traded stock and interests in inc venture	corporated and unincorporated businesses, including an interest in an LLC), partnership, and
☐ Yes	s. Give specific information about them Name of entity:		
Nego Non-	ptiable instruments include personal checks	negotiable and non-negotiable instruments s, cashiers' checks, promissory notes, and money orders. ot transfer to someone by signing or delivering them.	
■ No □ Yes	s. Give specific information about them Issuer name:		
	ement or pension accounts nples: Interests in IRA, ERISA, Keogh, 401	(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
Yes	s. List each account separately. Type of account:	Institution name:	
		401(k) through employer OSF with PNC Bank	\$13,921.00
Your	rity deposits and prepayments share of all unused deposits you have mad nples: Agreements with landlords, prepaid i	de so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications companies, or othe	ers
	ition (A contract for a posied)	Institution name or individual:	
■ No	Issuer name and description	money to you, either for life or for a number of years) on.	
24. Interes		a qualified ABLE program, or under a qualified state tuition program.	
☐ Yes		iption. Separately file the records of any interests.11 U.S.C. § 521(c):	
■ No		ty (other than anything listed in line 1), and rights or powers exercisable fo	r your benefit
⊔ Yes	. Give specific information about them		

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	btor 1		I. Roushia er I. Roushia		Document	Page 14 of 69		
				s trada sacr	ets, and other intellect	ual proporty	Case number (if known)	
	Examp	oles: Inter	net domain name	es, websites, p	proceeds from royalties	and licensing agreem	ents	
		Give spe	ecific information	about them				
			hises, and other		ınqibles			
						on holdings, liquor lice	enses, professional licens	ses
		Give spe	ecific information	about them				
Mo	oney or	property	owed to you?					Current value of the
								portion you own? Do not deduct secured
								claims or exemptions.
	Tax ref ■ No	funds ow	ed to you					
		Give spe	cific information a	bout them, in	cluding whether you alre	eady filed the returns	and the tax years	
29.		support		alimony, spo	usal support, child supp	ort maintenance dive	orce settlement, property	v settlement
	■ No						oree comeming propert	y comomon
l	☐ Yes.	Give spec	cific information	••••				
30.	Other a	amounts	someone owes	you				
	Examp	oles: Unpa bene	aid wages, disabil efits; unpaid loans	lity insurance s you made to	payments, disability ber someone else	nefits, sick pay, vacati	ion pay, workers' compe	ensation, Social Security
	■ No							
	☐ Yes.	Give spe	cific information					
31.			urance policies th, disability, or lif	fe insurance;	health savings account	(HSA); credit, homeov	wner's, or renter's insura	nce
	■ No							
ı	LJ Yes. ≀	Name the		any of each p npany name:	olicy and list its value.	Benefici	iary:	Surrender or refund
								value:
	If you a		neficiary of a livir		n someone who has di ct proceeds from a life in		e currently entitled to rec	eive property because
	■ No □ Yes	Give sne	cific information					
		G.10 Gpc						
					you have filed a lawsu surance claims, or right		d for payment	
	_	Describe	each claim					
		continger	nt and unliquida	ted claims of	every nature, includir	g counterclaims of	the debtor and rights to	o set off claims
	■ No □ Yes.	Describe	each claim					
		ancial as	ssets you did no	t already list				
	■ No □ Yes.	Give spe	cific information					
					rom Part 4, including a	ny entries for naces	s vou have attached	
36.	for Pa	art 4. Wri	te that number h	nere	rom Part 4, including a	enuica ioi payes	, you nave attached	\$14,451.00
Par	t 5: Des	scribe Any	/ Business-Related	d Property You	Own or Have an Interest	In. List any real estate	in Part 1.	

Official Form 106A/B Schedule A/B: Property page 5

	Case 16-82037	Doc 1	Filed 08/30/16 Document	Entered 08 Page 15 of	8/30/16 14:02:09 69	Desc Main
Debto Debto				_	Case number (if known)	
	you own or have any legal or equivole. Go to Part 6. Yes. Go to line 38.	itable interest ir	n any business-related p	roperty?		
Part 6	Describe Any Farm- and Comme If you own or have an interest in fa			n or Have an Interes	it In.	
46. D	o you own or have any legal o	r equitable int	erest in any farm- or o	commercial fishin	g-related property?	
•	No. Go to Part 7.					
[Yes. Go to line 47.					
Part 7	Describe All Property You	Own or Have ar	n Interest in That You Did	l Not List Above		
	o you have other property of a					
	Examples: Season tickets, countr No	y club membel	rsnip			
	Yes. Give specific information					
	Add the dollar value of all of y		om Part 7. Write that n	umber here		\$0.00
Part 8	List the Totals of Each Part	of this Form				
55.	Part 1: Total real estate, line 2	***************************************	•••••	•••••		\$21,000.00
56 .	Part 2: Total vehicles, line 5			\$3,500.00		
57.	Part 3: Total personal and hou	sehold items,	line 15	\$4,700.00		
58.	Part 4: Total financial assets, I	ine 36		\$14,451.00		
59.	Part 5: Total business-related	property, line	45	\$0.00		
	Part 6: Total farm- and fishing-			\$0.00		
61.	Part 7: Total other property no	t listed, line 5	+	\$0.00		
62.	Total personal property. Add lii	nes 56 through	61	\$22,651.00	Copy personal property t	sotal \$22,651.00
63 .	Total of all property on Schedu	ule A/B. Add lii	ne 55 + line 62			\$43,651.00

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Fill in this infor	mation to identify your	case:	Pane In III.09	
Debtor 1	Eric M. Roushia			
	First Name	Middle Name	Last Name	
Debtor 2	Heather I. Roushi	ia		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Ра	Identify the Property You Claim as E	:xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	1997 Ford Explorer 194,000 miles Line from Schedule A/B: 3.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
	Line from Schedule AVB: 3.1			100% of fair market value, up to any applicable statutory limit	
	1977 Yahama XS650 Motorcycle Line from Schedule A/B: 3.2	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(c)
	Line nom Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
	2000 Ford Expedition 231k miles	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
	Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
	Misc. household goods, furnishings	\$2,000.00	•	\$2,000.00	735 ILCS 5/12-1001(b)
	& appliances Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Clothing	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(a)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

Entered 08/30/16 14:02:09 Case 16-82037 Doc 1 Filed 08/30/16 Desc Main Document Page 17 of 69 Eric M. Roushia Debtor 1 Case number (if known) Heather I. Roushia Debtor 2 Specific laws that allow exemption Amount of the exemption you claim Brief description of the property and line on Current value of the Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 735 ILCS 5/12-1001(b) Wedding Ring \$1,200,00 \$1,200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Savings acct - Members Alliance 735 ILCS 5/12-1001(b) \$25.00 \$25.00 **Credit Union** Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking acct - Members Alliance** 735 ILCS 5/12-1001(b) \$500.00 \$500.00 **Credit Union** Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **OSF Credit Union** 735 ILCS 5/12-1001(b) \$5.00 \$5.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 401(k) through employer OSF with 735 ILCS 5/12-1006 100% \$13,921.00 **PNC Bank** Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Fill in this information to identify your case: Debtor 1 Eric M. Roushia First Name Middle Name Last Name Debtor 2 Heather I. Roushia (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column A Column B Column C 2. List all secured claims, if a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Value of collateral Amount of claim Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. portion Do not deduct the that supports this value of collateral claim If any 2.1 US Bank Home Mortgage Describe the property that secures the claim: \$16,354.00 \$21,000.00 \$0.00 Creditor's Name 1639 10th Avenue Rockford, IL 61104 Winnebago County As of the date you file, the claim is: Check all that 4801 Frederica St. Owensboro, KY 42301 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.

\$16,354.00

Write that number here:

\$16,354.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Page 10 of 60 Document Fill in this information to identify your case: Debtor 1 Eric M. Roushia Last Name Middle Name First Name Debtor 2 Heather I. Roushia Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2 **Total claim** 4.1 **AES** Last 4 digits of account number \$3,075.00 Nonpriority Creditor's Name PO Box 2461 When was the debt incurred? Harrisburg, PA 17106-2461 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Student Loan

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Debtor 1 Eric M. Roushia Debtor 2 Heather I. Roushia Case number (if know) 4.2 **Bill Me Later** Last 4 digits of account number \$971.00 Nonpriority Creditor's Name PO Box 105658 When was the debt incurred? Atlanta, GA 30348 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans lacksquare Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Capital One Last 4 digits of account number 2953 \$683.00 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? Salt Lake City, UT 84130-0281 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts No. ☐ Yes Other. Specify 4.4 Capital One Bank, NA Last 4 digits of account number \$303.00 Nonpriority Creditor's Name PO Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debtor 1 Eric M. Roushia Case number (if know) Debtor 2 Heather I. Roushia \$151.00 Last 4 digits of account number 4.5 Comcast Nonpriority Creditor's Name When was the debt incurred? 4450 Kishwaukee Street Rockford, IL 61109 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.6 ComEd Last 4 digits of account number \$229.00 Nonpriority Creditor's Name **Bill Payment Center** When was the debt incurred? Chicago, IL 60668-0001 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.7 **Comenity Capital Bank** Last 4 digits of account number \$3,061.00 Nonpriority Creditor's Name c/o Enhanced Recovery When was the debt incurred? PO Box 23870 Jacksonville, FL 32241-3870 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Entered 08/30/16 14:02:09 Desc Main Case 16-82037 Doc 1 Filed 08/30/16 Document Page 22 of 69 Debtor 1 Eric M. Roushia Debtor 2 Heather I. Roushia Case number (if know) 4.8 **Convergent Healthcare Recoveries** Last 4 digits of account number \$20.00 Nonpriority Creditor's Name 121 NE Jefferson St. - Ste 100 When was the debt incurred? Peoria, IL 61602 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans lacksquare Check if this claim is for a community Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.9 **Cornerstone Clinic** Last 4 digits of account number \$98.00 Nonpriority Creditor's Name PO Box 1658 When was the debt incurred? Rockford, IL 61110-0158 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Credit One Bank	Last 4 digits of account number
Nonpriority Creditor's Name PO Box 98873	When was the debt incurred?
Las Vegas, NV 89193-8873	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply
Who incurred the debt? Check one.	
☐ Debtor 1 only	☐ Contingent
Debtor 2 only	☐ Unliquidated
■ Debtor 1 and Debtor 2 only	☐ Disputed
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
☐ Check if this claim is for a community	☐ Student loans
debt	Obligations arising out of a separation agreement or divorce that you did not
Is the claim subject to offset?	report as priority claims
■ No	\square Debts to pension or profit-sharing plans, and other similar debts
☐ Yes	Other. Specify

Other. Specify

\$540.00

■ No □ Yes

4.1

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Debtor Debtor	r 1 Eric M. Roushia r 2 <u>Heather I. Roushia</u>	Case number (if know)	
4.1 1	EdFinancial/ESA	Last 4 digits of account number	\$1,800.00
	Nonpriority Creditor's Name 120 N. Seven Oaks Dr. Knoxville, TN 37922	When was the debt incurred?	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
		Student Loan	
4.1			
2	Equifax	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name ATTN: Bankruptcy Dept PO Box 740241	When was the debt incurred?	
	Atlanta, GA 30374 Number Street City State Zlp Code Who Incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice Only	
4.1	Experian	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 2002	When was the debt incurred?	
	Allen, TX 75013 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Notice Only	

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Fingerhut	Last 4 digits of account number	\$88
Nonpriority Creditor's Name PO Box 166 Newark, NJ 07101-0166	When was the debt incurred?	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
First Energy Solutions	Last 4 digits of account number	\$2
Nonpriority Creditor's Name c/o RMS	When was the debt incurred?	
PO Box 523		
Richfield, OH 44286 Number Street City State Zlp Code	As of the date you file the claim to Obest all that and	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
•	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
First Premier Bank	Last 4 digits of account number	\$1,04
Nonpriority Creditor's Name 601 S. Minnesota Ave.	When was the debt incurred?	
Sioux Falls, SD 57104 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	75 of the date you me, are claim to oneck an that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
_	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	

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Debt	or 2 Heather I. Roushia	Case number (if know)	
4.1	GLHE/Bank of America	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name 2401 International Ln. PO Box 7859	When was the debt incurred?	
	Madison, WI 53704-3121 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dialities. Officer an mat apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		☐ Debts to pension or profit-sharing plans, and other similar debts	

	Yes	Other. Specify	
4.1 8	Jefferson Capital System	Last 4 digits of account number	\$775.00
	Nonpriority Creditor's Name 16 McIeland Rd. Saint Cloud, MN 56303	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	MUDO I DUIL.		
9	MHRC Inc Billing Nonpriority Creditor's Name	Last 4 digits of account number	\$335.00
	PO Box 15395	When was the debt incurred?	
	Loves Park, IL 61132-5395	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	dept Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	<u> </u>	
	□ 169	Other. Specify	

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Debto	Heather I. Roushia	Case number (if know)	
4.2			
0	Midwest Dental	Last 4 digits of account number	\$71.00
	Nonpriority Creditor's Name 1334 E. State St.	When was the debt incurred?	
	Rockford, IL 61104	When was the dept incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.2			
1	National City Bank of Cleveland	Last 4 digits of account number	\$778.00
	Nonpriority Creditor's Name PO Box 7860	When was the debt incurred?	
	Madison, WI 53707-7860		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	☐ Other. Specify	
1.2	Navient	Last 4 digits of account number	\$11,980.00
	Nonpriority Creditor's Name		VIII,000.00
	PO Box 9655	When was the debt incurred?	
	Wilkes Barre, PA 18773-9655 Number Street City State Zlp Code	As of the date way file the plains in Obselval that each	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	_	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Student Loan - co signed with father and	

mother

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	1 Eric M. Roushia 2 Heather I. Roushia	Case number (if know)	
4.2 3	Nicor Gas	Last 4 digits of account number	\$5,000.00
	Nonpriority Creditor's Name PO Box 8350 Aurora, IL 60507-8350	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	OSF Saint Anthony Medical Center	Last 4 digits of account number	\$5,913.00
	Nonpriority Creditor's Name 5666 East State Street Rockford, IL 61108-2472	When was the debt incurred?	
•	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2 5	OSF Healthcare SA	Last 4 digits of account number	\$125.00
	Nonpriority Creditor's Name 6030 Garrett Ln. Rockford, IL 61107-6638	When was the debt incurred?	
_	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Heather I. Roushia	Case number (if know)	
OSF Healthcare System	Last 4 digits of account number	\$320.0
Nonpriority Creditor's Name 7978 Solution Center Chicago, IL 60677-7009	When was the debt incurred?	\$320. (
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	•	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	
OSF Home Medical	Last 4 digits of account number	\$218.0
Nonpriority Creditor's Name		
c/o Creditors Protection Svc 202 W. State St #300	When was the debt incurred?	
Rockford, IL 61101 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Officer all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
OSF Medical Group	Last 4 digits of account number	\$115.0
Nonpriority Creditor's Name	<u> </u>	
PO Box 91011	When was the debt incurred?	
Chicago, IL 60680-8807 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

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	r 1 Eric M. Roushia r 2 Heather I. Roushia	Case number (if know)	
4.2 9	Paypal Credit	Last 4 digits of account number	\$3,112.00
	Nonpriority Creditor's Name c/o SIMM Associates Inc 800 Pencader Dr Newark, DE 19702	When was the debt incurred?	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
		— Ottlet. Specify	
4.3 0	PNC Bank/GLELSI Nonpriority Creditor's Name	Last 4 digits of account number	\$875.00
	PO Box 7860 Madison, WI 53707	When was the debt incurred?	
	Number Street City State ZIp Code Who Incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Student Loan	
		Student Loan	
4.3	Rock River Water Reclamation Nonpriority Creditor's Name	Last 4 digits of account number	\$317.00
	3333 Kishwaukee Street P.O. Box 7480 Rockford, IL 61126-7480	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Heather I. Roushia	Case number (if know)	
Rockford Orthopedic Associates	Look & Halle of account	***
Nonpriority Creditor's Name Box 78620 Milwaukee, WI 53278	Last 4 digits of account number When was the debt incurred?	\$90.00
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Rockford Radiology	Last 4 digits of account number	\$444.00
Nonpriority Creditor's Name P.O. Box 5368	When was the debt incurred?	·
Rockford, IL 61125-0638 Number Street City State ZIp Code	As of the date were file the state to Obert with the second	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	□ Contingent	
Debtor 2 only	□ Unliquidated	
■ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Sallie Mae Inc	Last 4 digits of account number	\$16,000.00
Nonpriority Creditor's Name	<u> </u>	
PO Box 9500 Wilkes Barre, PA 18773-9500	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	•••	
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loansObligations arising out of a separation agreement or divorce that you did not	
is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	STUDENT LOSD	

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	1 Eric M. Roushia 2 Heather I. Roushia	Case number (if know)	
4.3 5	Southwest Credit Systems	Last 4 digits of account number	\$152.00
	Nonpriority Creditor's Name 4120 International Pkwy Suite 1100	When was the debt incurred?	
	Carrollton, TX 75007-1958 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3 6	Synchrony Bank/Amazon	Last 4 digits of account number	\$1,012.00
	Nonpriority Creditor's Name PO Box 960015 Orlando, FL 32896-0015	When was the debt incurred?	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.3	Synchrony Bank/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	\$503.00
	PO Box 960024 Orlando, FL 32896-0024	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debtor 1 Eric M. Roushia Debtor 2 Heather I. Roushia Case number (if know) 4.3 **Target** \$514.00 8 Last 4 digits of account number Nonpriority Creditor's Name **PO Box 673** When was the debt incurred? Minneapolis, MN 55440 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other, Specify 4.3 **Target Bank Visa** \$479.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 3701 Wayzata Blvd #2C When was the debt incurred? Minneapolis, MN 55416 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 \$0.00 **Transunion** Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 1000 Crum Lynne, PA 19022 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Notice Only ☐ Yes

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Debi	or 2 Heather I. Roushia	Case number (if know)	
4.4 1	US Bank Home Mortgage	Last 4 digits of account number	\$16,354.00
•	Nonpriority Creditor's Name 4801 Frederica St. Owensboro, KY 42301	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.4 2	US Dept of Education/GSC/CHI Nonpriority Creditor's Name	Last 4 digits of account number	\$27,163.00
	PO Box 4222	When was the debt incurred?	
	Iowa City, IA 52244	<u></u>	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	Debtor 2 only	☐ Contingent	
	<u> </u>	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Student Loan	
4.4 3	UW Health Physicians	Last 4 digits of account number	\$150.00
<u> </u>	Nonpriority Creditor's Name		V100.00
	PO Box 2978	When was the debt incurred?	
	Milwaukee, WI 53201-2978 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The event date you me, all didnin to. Check an allat apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debto	or 2 Heather I. Roushia	Case number (if know)	
1.4	Variance Windows		
<u>:</u>	Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	\$680.00
	P.O. Box 25506	When was the debt incurred?	
	Lehigh Valley, PA 18002-5506	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.4	Walmart/Synchrony Bank		\$715.00
	Nonpriority Creditor's Name	Last 4 digits of account number	\$715.00
	PO Box 530927	When was the debt incurred?	
	Atlanta, GA 30353-0927		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1.4	Webank/Fingerhut	Last 4 digits of account number	\$307.00
<u></u>	Nonpriority Creditor's Name		·
	6250 Ridgewood Rd.	When was the debt incurred?	
	Saint Cloud, MN 56303 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	-	
	<u> </u>	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	ls the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
	ter 103	— Outer, Specify	

Entered 08/30/16 14:02:09 Desc Main Case 16-82037 Doc 1 Filed 08/30/16 Document Page 35 of 69 Debtor 1 Eric M. Roushia Case number (if know) Debtor 2 Heather I. Roushia 4.4 \$843.00 WebBank/Gettington Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6250 Ridgewood Rd. WI 53030 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community deht Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other, Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **AFNI** Line 4.44 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 3427 Part 2: Creditors with Nonpriority Unsecured Claims **Bloomington, IL 61702-3427** Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Alliance One Line 4.39 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4850 Street Rd. - Ste 300 Part 2: Creditors with Nonpriority Unsecured Claims Feasterville Trevose, PA 19053 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? AllianceOne Receivables Mgt., Inc. Line 4.3 of (Check one): Part 1: Creditors with Priority Unsecured Claims P.O. Box 3111 Part 2: Creditors with Nonpriority Unsecured Claims Southeastern, PA 19398-3111 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **ARS National Services** Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims 201 W. Grande Ave. Part 2: Creditors with Nonpriority Unsecured Claims Escondido, CA 92025 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Asset Recovery Solutions** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2200 E. devon Ave. #200 Part 2: Creditors with Nonpriority Unsecured Claims Des Plaines, IL 60018-4501 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Berman & Rabin, PA Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 15280 Metcalf Ave. Part 2: Creditors with Nonpriority Unsecured Claims Overland Park, KS 66223 Last 4 digits of account number

CCB Credit Services PO Box 272 Springfield, IL 62705-0272 On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Name and Address Official Form 106 E/F

Name and Address

Schedule E/F: Creditors Who Have Unsecured Claims

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Northland Group PO Box 129

Name and Address

Official Form 106 E/F

Part 1: Creditors with Priority Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.16 of (Check one):

Part 2: Creditors with Nonpriority Unsecured Claims

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••	Total tile amounts of certain types	oi unsecurea cialilis. Ili	us information is for	statisticai reporting purbose	S ONIV. 28 U.S.C. 6159.	. Add the amounts for each
	type of unsecured claim.					

	_				Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ _	0.00

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 2 Heather I. Roushia Case number (if know) Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f. Student loans 6f. 35,708.00 Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts 6g. 6h. 0.00 Other. Add all other nonpriority unsecured claims. Write that amount 6i. 73,715.00 Total Nonpriority. Add lines 6f through 6i. 6i. 109,423.00

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	Docume	nt Pane 39 nt 69	
ation to identify your	case:		
Eric M. Roushia			
First Name	Middle Name	Last Name	
Heather I. Roushi	ia		
First Name	Middle Name	Last Name	
kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
			☐ Check if this is an
	Eric M. Roushia First Name Heather I. Roushi First Name	First Name Middle Name Heather I. Roushia First Name Middle Name	Eric M. Roushia First Name Middle Name Last Name Heather I. Roushia First Name Middle Name Last Name

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code					State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
2.3	City		State	ZIP Code	
2.5	Name			· · · · · · · · · · · · · · · · · · ·	
	1101110				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	Name				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Fill in this information to identify your case: Debtor 1 Eric M. Roushia First Name Middle Name Last Name Debtor 2 Heather I. Roushia (Spouse if, filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Check all schedules that apply: 3.1 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G. line Number Street State ZIP Code City 3.2 ☐ Schedule D, line Name ☐ Schedule E/F, line ☐ Schedule G. line Number Street ZIP Code State City

Fill	in this information to identify your c	ase:							
Del	otor 1 Eric M. Rous	shia			_				
	otor 2 Heather I. R	oushia		-	_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_				
	se number 					Check if this is: An amende A supplement	d filing ent showi		
\bigcirc	fficial Form 106I							following date) :
						MM / DD/ Y	YYY		
	chedule I: Your Inc								12/15
sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11: Describe Employment	are married and not filing w	ng jointly, and your s ith you, do not includ	pouse de infor	is livi matio	ng with you, incl n about your spo	ude infor ouse. If m	rmation abou nore space is	it your s needed,
1.	Fill in your employment information.		Debtor 1	ili sa		Debtor	or non-	fillingispõuse	
	If you have more than one job, attach a separate page with information about additional	F1	☐ Employed			■ Emple	■ Employed		
		Employment status	Not employed			☐ Not e	☐ Not employed		
	employers.	Occupation	Stay at home da	d		RN			
	Include part-time, seasonal, or self-employed work.	Employer's name				OSF S	aint Ant	thony Medic	cal Center
	Occupation may include student or homemaker, if it applies.	Employer's address	•					e Street 1108-2472	
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
Esti spou	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any li	ne, write \$0 in the	space. Ir	nclude your n	on-filing
	u or your non-filing spouse have mees space, attach a separate sheet to		ombine the information	for all	emplo	yers for that perso	n on the	lines below. I	f you need
					3	For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	0.00	\$	4,283.61	<u> </u>
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$ _	0.00	<u>)</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$_	4,283.61	
					L				1

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Eric M. Roushia Debtor 1 Debtor 2 Heather I. Roushia Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 4 0.00 4,283.61 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a \$ 0.00 657.02 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 S 123.54 Voluntary contributions for retirement plans 5c. 5c. \$ \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 S 0.00 5e. Insurance 5e. \$ \$ 0.00 0.00 5f. Domestic support obligations 5f. \$ 0.00 \$ 0.00 5g. Union dues 5g. \$ 0.00 \$ 0.00 Other deductions. Specify: QCP Standard 5h. 5h.+ \$ 0.00 \$ 440.01 + Vision S 0.00 \$ 22.04 Accident \$ 0.00 25.37 Vol Term Life 0.00 6.89 Vol Term Life - Spouse 0.00 1.47 Vol Term Life - Dependent 0.00 S 2.17 Critical Illness 0.00 S 3.90 Critical Illness - Spouse 0.00 \$ 5.85 Critical Illness - Child 0.00 S 6.18 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5q+5h. 6. \$ 0.00 \$ 1,294.44 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 0.00 \$ 2.989.17 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 0.00 S 0.00 8b. Interest and dividends 8b. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 0.00 S 0.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 Social Security 8e. \$ 0.00 S 0.00 Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ \$ 0.00 0.00 Specify: Pension or retirement income 8g. \$ \$ 0.00 0.00 8g. 8h.+ \$ Other monthly income. Specify: 0.00 + S 0.00 8h. 9 S 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 0.00 10. \$ \$ = \$ 0.00 2,989.17 2.989.17 Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. +\$ 0.00 11. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,989.17 12. \$ applies Combined monthly income

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Debtor 1 Debtor 2	Eric M. Roushia Heather I. Rous		
13. Doy	No.	ease or decrease within the year after you file this form?	
	Yes. Explain:		

Official Form 106I

Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Eric M. Rous	hia			Che	eck if this is:	
	40						An amended filing	
l .	otor 2 ouse, if filing)	Heather I. Ro	ushia					wing postpetition chapter fithe following date:
	-			.==				
Unit	ed States Bank	ruptcy Court for the:	NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number							
(11 %)		· ·-						
O	fficial Fo	rm 106J						
		J: Your I	 Exper	nses				12 <i>/-</i>
Be	as complete	and accurate as	possible	. If two married people ar	e filing together, bo	th are equ	ually responsible for	or supplying correct
info	ormation. If m	ore space is ned n). Answer ever	eded, atta	ch another sheet to this	form. On the top of	any additi	ional pages, write	your name and case
	<u> </u>	•	•					
Par 1.	ls this a join	ribe Your House nt case?	noid					
	☐ No. Go to							
	Yes. Doe	es Debtor 2 live i	n a separ	ate household?				
	■ N	ю						
	ΠY	es. Debtor 2 mus	t file Offici	al Form 106J-2, Expenses	for Separate Housel	old of Del	otor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D	•	Yes.	Fill out this information for	Dependent's relation	onship to	Dependent's	Does dependent
	Debtor 2.		■ Yes.	each dependent	Debtor 1 or Debtor	2	age	live with you?
	Do not state	the						□ No
	dependents	names.			Daughter			Yes
								□ No
								☐ Yes
								□ No □ Yes
							_	□ Yes □ No
								☐ Yes
3.	Do vour exi	oenses include	_					□ res
٥.	expenses o	f people other th	nan 👝	No				
	yourself an	d your depender	nts? ☐	Yes				
Par	t 2: Estim	ate Your Ongoir	na Monthi	v Evnenses				
Est	imate vour ex	penses as of yo	our bankrı	uptcy filing date unless y	ou are using this fo	rm as a s	upplement in a Ch	apter 13 case to report
exp	enses as of	a date after the b	ankruptc	y is filed. If this is a supp	elemental Schedule	<i>J</i> , check t	he box at the top o	of the form and fill in the
app	olicable date.							
Incl	lude expense	s paid for with n	ion-cash	government assistance i luded it on <i>Schedule I:</i> Y	f you know			
	value of Suc ficial Form 10		a nave inc	sidded it on Schedule 1. 1	our income		Your exp	
•		•				20 T.		45、15.15 Little 15.20
4.		or home owners! and any rent for the		ses for your residence. I r lot.	nclude first mortgage	4.	\$	650.00
	If not include	led in line 4:						
	4a. Real	estate taxes				4a.		0.00
	•	rty, homeowner's				4b.		0.00
				upkeep expenses		4c.	·	30.00
_		owner's associati			me equity lesse	4d. 5.	\$ •	0.00
5.	Additional I	nortgage payme	anto for yo	our residence, such as ho	me equity wans	J.	₩	0.00

Debitor 2 Heather I. Roushia Case number (if known)	Deb	tor 1	Eric M. Roushia			
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modification to the terms of your mortgage? ■ No.		For ex	cample, do you expect to finish paying for your car loan within the year or do you expect your n	nortazae	payment to increase	or decrease because of a
		modif	cation to the terms of your mortgage?		,	
		■ N	o .			
☐ Yes. Explain here:		□ Ye	es. Explain here:			

Case 16-82037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main Document Page 46 of 69

Fill in this infor	mation to identify your	case:		
Debtor 1	Eric M. Roushia			STATUTE OF THE STATE OF THE STA
HO St.	First Name	Middle Name	Last Name	MINISTER TO PROPERTY OF THE PR
Debtor 2	Heather I. Roushi	ia		January Grand College
(Spouse if, filing)	First Name	Middle Name	Last Name	VTHECT
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				Paring to a place of specific
(if known)		= 11		Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read to that they are true and correct. X /s/ Eric M. Roushia Eric M. Roushia Signature of Debtor 1	X /s/ Heather I. Roushia Heather I. Roushia Signature of Debtor 2
Date August 30, 2016	Date August 30, 2016

Fill	in this inform	ation to identify you	r case:			
Det	otor 1	Eric M. Roushia				
Det	otor 2	First Name Heather I. Rousi	Middle Name	Last Name		
1	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas	se number					
(if kn					-	Check if this is an mended filing
∩f	ficial Ear	m 107				
	ficial For		Affairs for Indivi	duals Filing for F	Rankruntov	4/16
Be a	is complete ai	nd accurate as possi	ble. If two married people attach a separate sheet to	are filing together, both are	e equally responsible for sup ny additional pages, write you	plying correct
Par	t 1: Give Do	etails About Your Ma	rital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	Married					
	□ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live no	w.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
	1639 10th A Rockford, I		From-To: July 2005 to ! 2014	Same as Debtor	1	Same as Debtor 1 From-To:
	es and territorie	es include Arizona, Ca		vada, New Mexico, Puerto F	nity property state or territor Rico, Texas, Washington and V	
Par	t 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	nployment or from operatir u received from all jobs and have income that you receiv	all businesses, including par	rear or the two previous caled t-time activities. nder Debtor 1.	ndar years?
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	e e e e e e e e e e e e e e e e e e e
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$29,856.00
			☐ Operating a business		☐ Operating a business	
Offic	ial Form 107		Statement of Financial Af	fairs for Individuals Filing for I	Bankruptcy	page 1

Debtor 1		c M. Rous		Document		0/16 14.02.09 Des	C Main
Debtor 2		ather I. Ro			Case	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		dar year: December	31, 2015)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$19,032.00
				☐ Operating a business		☐ Operating a business	
		dar year be December		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$24,053.00
				☐ Operating a business		☐ Operating a business	
	Yes.	Fill in the de	erans.	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
					exclusions)		•
Part 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
. Are	eithei No.	Neither De	ebtor 1 nor	?'s debts primarily consume Debtor 2 has primarily consu a personal, family, or househol	ımer debts. Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
		During the No.	90 days bef	ore you filed for bankruptcy, di	d you pay any creditor a tota	l of \$6,425* or more?	
		□ Yes	paid that c	each creditor to whom you pai reditor. Do not include paymen payments to an attorney for the	its for domestic support oblig		
		* Subject		nt on 4/01/19 and every 3 years		or after the date of adjustmen	t.
	Yes.			or both have primarily consu ore you filed for bankruptcy, di		l of \$600 or more?	
		■ No.	Go to line	7.			
		□ Yes	include pa	each creditor to whom you pai yments for domestic support ol r this bankruptcy case.			

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Page 49 of 69 Document Eric M. Roushia Debtor 1 Case number (if known) Debtor 2 Heather I. Roushia Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Insider's Name and Address **Dates of payment Total amount Amount you** Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number U.S. Bank National Association vs **Foreclosure** Winnebago Co Pending **Heather Pfeffkerkorn** ☐ On appeal 15 CH 756 □ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property **Date** Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was **Amount** taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

Case 16-82037

Doc 1

Filed 08/30/16

Entered 08/30/16 14:02:09

Del	otor 1	Case 16-820		1 Filed 08/30/16 Document	Entered 08/30/16 1 Page 50 of 69	4:02:09 Desc	Main
	otor 2	Heather I. Rousi			Case number	ef (if known)	
Par	t 5:	List Certain Gifts a	nd Contributio	ons			
13.		in 2 years before you No Yes. Fill in the details		kruptcy, did you give any (gifts with a total value of more	than \$600 per person	?
	Gifts	s with a total value operson	•	Describe the g	fts	Dates you gave the gifts	Value
		son to Whom You Garess:	ave the Gift and	d			
14.		in 2 years before you No Yes. Fill in the details			gifts or contributions with a to	tal value of more than	\$600 to any charity?
	Gifts more Chai	res. Fill if the details s or contributions to e than \$600 rity's Name ress (Number, Street, Cit	charities that	total Describe what	you contributed	Dates you contributed	Value
Par	t 6:	List Certain Losses	3				
15.		n 1 year before you mbling?	filed for bankr	uptcy or since you filed fo	or bankruptcy, did you lose any	ything because of the	t, fire, other disaster,
		No Yes. Fill in the details	s.				
		cribe the property yo the loss occurred	ou lost and		coverage for the loss nsurance has paid. List pending 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7:	List Certain Payme	nts or Transfe	rs			
16.	cons	ulted about seeking	bankruptcy or	r preparing a bankruptcy p	else acting on your behalf pay petition? ling agencies for services require	• • •	rty to anyone you
	_	No					
	Pers Addi Ema	Yes. Fill in the details son Who Was Paid ress ill or website addres son Who Made the P		transferred	d value of any property	Date payment or transfer was made	Amount of payment
	Sch 4023	lueter Ecklund 3 Charles Street kford, IL 61108	-,	Attorney Fees	3		\$1,200.00
17.	prom	ised to help you dea	al with your cre	ruptcy, did you or anyone editors or to make paymen at you listed on line 16.	else acting on your behalf pay nts to your creditors?	or transfer any prope	rty to anyone who
	_	No No. Ellis the detaile					
	Pers	Yes. Fill in the details son Who Was Paid ress		Description an transferred	d value of any property	Date payment or transfer was made	Amount of payment

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18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.							
	_		December and		Dagas	dha ann muanamh an	Data transfer was	
		rson Who Received Transfer Idress	Description and very property transfer		paym	libe any property or ents received or debts n exchange	Date transfer was made	
	Pe	rson's relationship to you			•	•		
19.		thin 10 years before you filed for bankrup neficiary? (These are often called asset-pro	•	ny property to a	a self-settle	d trust or similar device	of which you are a	
		Yes. Fill in the details.						
	Na	me of trust	Description and v	value of the pro	operty trans	sferred	Date Transfer was made	
Par	t 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Uni	ts		
20.	sol Inc	thin 1 year before you filed for bankrupto d, moved, or transferred? lude checking, savings, money market, o uses, pension funds, cooperatives, assoc	er other financial accou	nts; certificate	s of deposi		·	
		No						
		Yes. Fill in the details.						
		tme of Financial Institution and Idress (Number, Street, City, State and ZIP de)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing o transfe	
21.		you now have, or did you have within 1 y h, or other valuables?	ear before you filed for	r bankruptcy, a	any safe de _l	posit box or other depos	sitory for securities,	
		No						
		Yes. Fill in the details.						
	-	ume of Financial Institution Idress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Hav	ve you stored property in a storage unit o	or place other than you	r home within	1 year befo	re you filed for bankrupt	cy?	
		No						
		Yes. Fill in the details.						
		nme of Storage Facility Idress (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Par	t 9:	Identify Property You Hold or Control	for Someone Else					
23.		you hold or control any property that so someone.	meone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust	
		No						
	J	Yes. Fill in the details.						
		vner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	
Par	t 10	Give Details About Environmental Info	ormation					
For	the	purpose of Part 10, the following definition	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

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Eric M. Roushia Debtor 1 Debtor 2 Heather I. Roushia

Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or
regulations controlling the cleanup of these substances, wastes, or material.
Site means any location facility or preparty or defined under any environmental law whether you may a great any stilling it as you

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Rep	ort a	II notices, releases, and proceedings tha	t you know about, regardless of when t	hey occurred.	
24.	Has	any governmental unit notified you that	you may be liable or potentially liable u	nder or in violation of an environm	nental law?
		No Yes. Fill in the details. me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
	Au	areas (rumber, succe, only, state and air socie)	ZIP Code)	MIOW IL	
25.	Hav	e you notified any governmental unit of a	any release of hazardous material?		
		No Yes. Fill in the details.			
	Na	me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
26	Lav	e you been a party in any judicial or adm	ZIP Code)	nmantal law? Include settlements	and orders
20.	_		ministrative proceeding diluter any enviro	innentariawi melade settements	and orders.
		No Yes. Fill in the details.			
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	lature of the case	Status of the case
Par	t <u>1</u> 1:	Give Details About Your Business or C	Connections to Any Business		
27.	Wit	nin 4 years before you filed for bankrupto	cy, did you own a business or have any	of the following connections to an	ny business?
		\square A sole proprietor or self-employed in	n a trade, profession, or other activity, ei	ther full-time or part-time	
		☐ A member of a limited liability compa	any (LLC) or limited liability partnership	(LLP)	
		☐ A partner in a partnership			
		☐ An officer, director, or managing exe	ecutive of a corporation		
		☐ An owner of at least 5% of the voting	or equity securities of a corporation		
		No. None of the above applies. Go to P	art 12.		
		Yes. Check all that apply above and fill	in the details below for each business.		
		siness Name dress	Describe the nature of the business	Employer Identification number Do not include Social Security	
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	
28.		nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	ey, did you give a financial statement to	anyone about your business? Inc	lude all financial
		No			
		Yes. Fill in the details below.			
		me dress mber, Street, City, State and ZIP Code)	Date Issued		
Das	. 12.	Sign Relow			

Filed 08/30/16 Entered 08/30/16 14:02:09 Case 16-82037 Doc 1 Page 53 of 69 Document Eric M. Roushia Debtor 1 Case number (if known) Debtor 2 Heather I. Roushia are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Heather I. Roushia /s/ Eric M. Roushia Heather I. Roushia Eric M. Roushia Signature of Debtor 1 Signature of Debtor 2 Date August 30, 2016 Date August 30, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

☐ Yes

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Fill in this infor	mation to identify your case:		
Debtor 1	Eric M. Roushia		
	First Name Middle Name	e Last Name	
Debtor 2	Heather I. Roushia		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	inkruptcy Court for the: NORTHERN D	DISTRICT OF ILLINOIS	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo		ividuals Filing Under Chap	ter 7 12/15
_	ividual filing under chapter 7, you must	t fill out this form if:	
_	e claims secured by your property, or		
You must file thi	ever is earlier, unless the court extends	s not expired. ter you file your bankruptcy petition or by the date the time for cause. You must also send copies to	set for the meeting of creditors, the creditors and lessors you list
	eople are filing together in a joint case, and date the form.	both are equally responsible for supplying correct	information. Both debtors must
	and accurate as possible. If more space our name and case number (if known).	e is needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claim		
information be identify the cr		e D: Creditors Who Have Claims Secured by Prope What do you intend to do with the property th secures a debt?	
Creditor's U	S Bank Home Mortgage	■ Surrender the property.	■ No
name:		Retain the property and redeem it.	
Description of	1639 10th Avenue Rockford, IL	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	61104 Winnebago County	Retain the property and [explain]:	
Day 2: Lich Vo	Unavaried Barrard Barrard Daniel Lago		
For any unexpire in the informatio You may assume	n below. Do not list real estate leases. e an unexpired personal property lease	ed in Schedule G: Executory Contracts and Unexp Unexpired leases are leases that are still in effect; if the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended. o)(2).
Describe your u	nexpired personal property leases	en e	Will the lease be assumed?
Lessor's name:			□ No
Description of lea Property:	ised		☐ Yes
Lessor's name:			□ No
Description of lea	ased		_
Property:			☐ Yes
Lessor's name:			
Official Form 108	Statement of	f Intention for Individuals Filing Under Chapter 7	page

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Debtor 1 Eric M. Roushia Debtor 2 Heather I. Roushia	Case number (if known)
Description of leased Property:	□ No
The party of the p	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease. X	X /s/ Heather I. Roushia Heather I. Roushia Signature of Debtor 2
Date August 30, 2016	Date August 30, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

	Chap	ter 7:	Liquidation	
_		\$245	filing fee	
		\$75	administrative fee	
	+	\$15	trustee surcharge	
		\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans:

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
-	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes,

debts for fraud or theft.

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-82037

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

ln re	Eric M. Roush Heather I. Rou		•		Case No		
				Debtor(s)	Chapter	7	
1. F	Pursuant to 11 U .S.0	C. § 3:	29(a) and Fed. Bankr. F	MPENSATION OF ATTO 2. 2016(b), I certify that I am the attor	ney for the above na	med debtor(s) and that	
C	compensation paid to be rendered on behal	o me v If of tl	within one year before the debtor(s) in contemp	he filing of the petition in bankruptcy lation of or in connection with the ba	y, or agreed to be pain nkruptcy case is as f	d to me, for services ren	dered or to
						1,200.00	
	Prior to the filir	ng of t	his statement I have rec	ceived	\$	1,200.00	
	Balance Due				\$ <u></u>	0.00	
2. 7	The source of the co	mpen	sation paid to me was:				
	Debtor		Other (specify):				
3. 7	The source of compe	ensatio	on to be paid to me is:				
	Debtor		Other (specify):				
4. l	■ I have not agree	d to sh	nare the above-disclosed	d compensation with any other persor	unless they are men	mbers and associates of	my law firm.
ļ				mpensation with a person or persons the names of the people sharing in th			w firm. A
a b	n. Analysis of the do. Preparation and f	ebtor's iling of the d	s financial situation, and of any petition, schedule debtor at the meeting of	ed to render legal service for all aspect d rendering advice to the debtor in de es, statement of affairs and plan whic creditors and confirmation hearing, a	termining whether to h may be required;	o file a petition in bankr	uptcy;
6. E	Represen	tatio		osed fee does not include the followin ny dischargeability actions, jud versary proceeding.		ces, relief from stay	actions,
				CERTIFICATION			
	certify that the fore ankruptcy proceeding		is a complete statemen	t of any agreement or arrangement fo	r payment to me for	representation of the de	btor(s) in
A	ugust 30, 2016			/s/ David L. Davi			
D	ale			David L. Davitt 6			
				Signature of Attorn Schlueter Ecklu			
				4023 Charles St.			
				Rockford, IL 611			
				815 229-5333 Fo	ax: 815-229-0733 erlaw.com		
				Name of law firm	U. 1441.00111		

32037 Doc 1 Filed 08/30/16 Entered 08/30/16 14:02:09 Desc Main ATTORNEY'S CONTRACTIFICATION DAVID L. Davitt Case 16-82037 Doc 1

4023 Charles Street, Rockford, IL 61108 (815) 229-5333 FAX (815) 229-0733 E-Mail <u>ddavitt@rockriverlaw.com</u> www.rockriverlaw.net

If you receive services from our office in bankruptcy, the law requires that we sign a written agreement.

Our office will assist you in filing a Chapter 7 Bankruptcy Petition, including preparation of all the papers required to be filed with the Petition for the fees set forth below. We will represent you at the "Meeting of Creditors" which will be held approximately 4 to 5 weeks after filing of the case

If you sign below, you are agreeing to do the following:

- 1) To completely and honestly provide all the information and documentation we request.
- 2) To pay our fees prior to filing of bankruptcy case.
- 3) To complete the required pre-bankruptcy Credit Counseling session.
- 4) To promptly complete the required post-bankruptcy Financial Management Course.
- 5) To appear at the Meeting of Creditors with a picture ID and Social Security Card or other proof of your Social Security number.

Basic Fees:	\$ 1,200.00 Preparation of Petition and Basic Services (Plus \$23.00 for credit re	port)					
	\$ 335.00 Filing Fee (Charged by Bankruptcy Court – subject to adjustment by	law)					
Court Filing Fee to Be Paid: At Time of Filing Case In Installments After Filing Case							
additional fee of testing analysis d attorneys fees of	ent has represented that Client has an average income which is less than the median income of schold. Client agrees that, in the event that client's household income exceeds the median income of \$400.00 for the additional work required of attorney in connection with the mean testing is determines that a presumption of abuse would arise in a Chapter 7 case, the funds paid by ses of \$4,000.00 in a Chapter 13 case, which will require execution of a separate Rights and im approved by the court.	g analysis. In the event the means client will be credited towards the					
timely basis, add	ent will make final payment of fees by June 2016, with case to be understands and agrees that, in the event fees are not paid as agreed, or if necessary information, additional fees my be incurred in order to update work previously completed, and client may we will begin work on preparation of your papers when you make your first payment towar	be required to enter into a new fee					
ER HRClient r	ent represents to attorney that client has not filed any other bankruptcy case within the past 8	years.					
	ient understands that all income and all assets of any kind must be disclosed on the Bankrupto						
	ditional Charges:						
\$100.00	50.00 Appearance at Continued Meeting of Creditors, if client fails to appear or fails to bring 00.00 Amendments to Petition to add additional creditors after filing (plus \$30.00 filing fee). 50.00 Avoiding liens against personal property or real estate or motions to redeem.						
Fees Requiring	ring Separate Fee Agreement and Additional Retainer Before Service:						
\$250.00	Representation in Motions to Lift Automatic Stay, Objections to Exemulation Rule 2004 Examinations or any actual or threatened Adversary Processing	ption Claims, Motions to Dismiss, eedings.					
By signing below	elow, Clients also acknowledge receipt of the Disclosures required by Bankruptcy Code §§ 527	(a)(2)(A-D), 527(a)(1) and 527(b).					
David L. Davitt,	Vitt, Attorney Nay 19, 2016 Leathu Ko	eli.					
	Date Client / Debtor						

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United States Bankruptcy Court Northern District of Illinois

In re	Eric M. Roushia Heather I. Roushia		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors:	73
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	August 30, 2016	Isl Eric M. Roushia Eric M. Roushia Signature of Debtor	1 M	
Date:	August 30, 2016	/s/ Heather I. Roushia Heather I. Roushia Signature of Debtor	leath	er Kali

AES PO Box 2461 Harrisburg, PA 17106-2461

AFNI PO Box 3427 Bloomington, IL 61702-3427

Alliance One 4850 Street Rd. - Ste 300 Feasterville Trevose, PA 19053

AllianceOne Receivables Mgt., Inc. P.O. Box 3111 Southeastern, PA 19398-3111

ARS National Services 201 W. Grande Ave. Escondido, CA 92025

Asset Recovery Solutions 2200 E. devon Ave. #200 Des Plaines, IL 60018-4501

Berman & Rabin, PA 15280 Metcalf Ave. Overland Park, KS 66223

Bill Me Later PO Box 105658 Atlanta, GA 30348

Capital One PO Box 30281 Salt Lake City, UT 84130-0281

Capital One Bank, NA PO Box 6492 Carol Stream, IL 60197

CCB Credit Services PO Box 272 Springfield, IL 62705-0272 Comcast 4450 Kishwaukee Street Rockford, IL 61109

ComEd Bill Payment Center Chicago, IL 60668-0001

Comenity Capital Bank c/o Enhanced Recovery PO Box 23870 Jacksonville, FL 32241-3870

Contract Callers 501 Greene St. Augusta, GA 30901

Convergent Healthcare Recoveries 121 NE Jefferson St. - Ste 100 Peoria, IL 61602

Cornerstone Clinic PO Box 1658 Rockford, IL 61110-0158

Credit One Bank PO Box 98873 Las Vegas, NV 89193-8873

Credit Protection Association L.P. 13355 Noel Road Dallas, TX 75240

Creditors Protection Service 202 W. State Street, Suite 300 P.O. Box 4115 Rockford, IL 61110-0615

EdFinancial/ESA 120 N. Seven Oaks Dr. Knoxville, TN 37922 Equifax ATTN: Bankruptcy Dept PO Box 740241 Atlanta, GA 30374

ERC
PO Box 23870
Jacksonville, FL 32241-3870

Experian
Attn: Bankruptcy Dept.
PO Box 2002
Allen, TX 75013

Fenton & McGarvey Law Firm 2401 Stanley Gault Pkwy Louisville, KY 40223

Fenton & McGarvey Law Firm 2401 Stanley Gault Pkwy. Louisville, KY 40223

Fingerhut PO Box 166 Newark, NJ 07101-0166

First Energy Solutions c/o RMS PO Box 523 Richfield, OH 44286

First Premier Bank 601 S. Minnesota Ave. Sioux Falls, SD 57104

Gettington.com PO Box 166 Newark, NJ 07101-0166

GLHE/Bank of America 2401 International Ln. PO Box 7859 Madison, WI 53704-3121 Great Lakes Higher Education PO Box 7860 Madison, WI 53707

Jefferson Capital System 16 Mcleland Rd. Saint Cloud, MN 56303

MHRC Inc. - Billing PO Box 15395 Loves Park, IL 61132-5395

Midland Credit Mgmt Inc. 2365 Northside Dr. - Ste 300 San Diego, CA 92108

Midwest Dental 1334 E. State St. Rockford, IL 61104

Monarch Recovery Mgt PO Box 21089 Philadelphia, PA 19114-0589

National City Bank of Cleveland PO Box 7860 Madison, WI 53707-7860

Navient PO Box 9655 Wilkes Barre, PA 18773-9655

Nicor Gas PO Box 8350 Aurora, IL 60507-8350

Northland Group PO Box 129 Thorofare, NJ 08086-0129

Northland Group PO Box 390846 Minneapolis, MN 55439 OSF Saint Anthony Medical Center 5666 East State Street Rockford, IL 61108-2472

OSF Healthcare SA 6030 Garrett Ln. Rockford, IL 61107-6638

OSF Healthcare System 7978 Solution Center Chicago, IL 60677-7009

OSF Home Medical c/o Creditors Protection Svc 202 W. State St. - #300 Rockford, IL 61101

OSF Medical Group PO Box 91011 Chicago, IL 60680-8807

Paypal Credit c/o SIMM Associates Inc 800 Pencader Dr Newark, DE 19702

PNC Bank/GLELSI PO Box 7860 Madison, WI 53707

Portfolio Recovery Associates PO Box 12914 Norfolk, VA 23541

Randall S. Miller & Associates, LLC 120 North LaSalle St. - Suite 1140 Chicago, IL 60602

Rock River Water Reclamation 3333 Kishwaukee Street P.O. Box 7480 Rockford, IL 61126-7480 Rockford Mercantile P.O. Box 5847 Rockford, IL 61125

Rockford Orthopedic Associates Box 78620 Milwaukee, WI 53278

Rockford Radiology P.O. Box 5368 Rockford, IL 61125-0638

Sallie Mae Inc PO Box 9500 Wilkes Barre, PA 18773-9500

Southwest Credit Systems 4120 International Pkwy Suite 1100 Carrollton, TX 75007-1958

State Collection Service 2509 S. Stoughton Rd Madison, WI 53716

State Collection Service Inc. PO Box 6250 Madison, WI 53716-0250

Synchrony Bank/Amazon PO Box 960015 Orlando, FL 32896-0015

Synchrony Bank/Walmart PO Box 960024 Orlando, FL 32896-0024

Target PO Box 673 Minneapolis, MN 55440

Target Bank Visa 3701 Wayzata Blvd #2C Minneapolis, MN 55416 Transunion Attn: Bankruptcy Dept. PO Box 1000 Crum Lynne, PA 19022

Transworld Systems Inc. PO Box 15520 Wilmington, DE 19850-5520

United Credit Service, Inc. 15 N. Lincoln Street P.O. Box 740 Elkhorn, WI 53121-0740

US Bank Home Mortgage 4801 Frederica St. Owensboro, KY 42301

US Dept of Education/GSC/CHI PO Box 4222 Iowa City, IA 52244

UW Health Physicians PO Box 2978 Milwaukee, WI 53201-2978

Verizon Wireless P.O. Box 25506 Lehigh Valley, PA 18002-5506

Walmart/Synchrony Bank PO Box 530927 Atlanta, GA 30353-0927

Webank/Fingerhut 6250 Ridgewood Rd. Saint Cloud, MN 56303

WebBank/Gettington 6250 Ridgewood Rd. WI 53030